

*Barker*  
Application or Docket Number  
**10/500629**

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2003

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

|                                  |               |                          |
|----------------------------------|---------------|--------------------------|
| TOTAL CLAIMS                     |               |                          |
| FOR                              | NUMBER FILED  | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 22 minus 20 = | 2                        |
| INDEPENDENT CLAIMS               | 1 minus 3 =   |                          |
| MULTIPLE DEPENDENT CLAIM PRESENT |               | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
|--|----------------------------------|-------|------------------------------------|--------------------------|
|  |                                  |       |                                    |                          |
| Total  | *                                | Minus | **                                 | =                        |
| Independent                                    | *                                | Minus | ***                                | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |       |                                    | <input type="checkbox"/> |

SMALL ENTITY TYPE      OTHER THAN  
OR SMALL ENTITY

|           |    |           |     |
|-----------|----|-----------|-----|
| RATE      | FE | RATE      | FE  |
| BASIC FEE |    | BASIC FEE | 920 |
| XS 9=     |    | XS18=     | 36  |
| X43=      |    | X86=      |     |
| +145=     |    | -290=     |     |
| TOTAL     |    | TOTAL     | 956 |

OTHER THAN

| SMALL ENTITY     | OR              | SMALL ENTITY     |                 |
|------------------|-----------------|------------------|-----------------|
| RATE             | ADDI-TIONAL FEE | RATE             | ADDI-TIONAL FEE |
| XS 9=            |                 | XS18=            |                 |
| X43=             |                 | X86=             |                 |
| +145=            |                 | +290=            |                 |
| TOTAL ADDIT. FEE |                 | TOTAL ADDIT. FEE |                 |

OTHER THAN

| AMENDMENT B                                    | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
|--|----------------------------------|-------|------------------------------------|--------------------------|
|  |                                  |       |                                    |                          |
| Total  | *                                | Minus | **                                 | =                        |
| Independent                                    | *                                | Minus | ***                                | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |       |                                    | <input type="checkbox"/> |

|                  |                 |                  |                 |
|------------------|-----------------|------------------|-----------------|
| RATE             | ADDI-TIONAL FEE | RATE             | ADDI-TIONAL FEE |
| XS 9=            |                 | XS18=            |                 |
| X43=             |                 | X86=             |                 |
| +145=            |                 | +290=            |                 |
| TOTAL ADDIT. FEE |                 | TOTAL ADDIT. FEE |                 |

| AMENDMENT C                                    | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
|--|----------------------------------|-------|------------------------------------|--------------------------|
|  |                                  |       |                                    |                          |
| Total  | *                                | Minus | **                                 | =                        |
| Independent                                    | *                                | Minus | ***                                | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |       |                                    | <input type="checkbox"/> |

|                  |                 |                  |                 |
|------------------|-----------------|------------------|-----------------|
| RATE             | ADDI-TIONAL FEE | RATE             | ADDI-TIONAL FEE |
| XS 9=            |                 | XS18=            |                 |
| X43=             |                 | X86=             |                 |
| +145=            |                 | +290=            |                 |
| TOTAL ADDIT. FEE |                 | TOTAL ADDIT. FEE |                 |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.